

Massachusetts Department of Environmental ProtectionBureau of Waste Prevention

Application for Collection Center For Used Oil and/or Surplus Paint

| | Please check which applies: Used Oil Surplus Paint See also Oil Collection Checklist, Paint Collection Checklist | | | | | | |
|----------------------------------|--|--|------------|---|--|--|--|
| | A. Identification Information | | | | | | |
| t: | 1. | Name of applicant/organizer: Service area – List municipalities to be served and number of households: | | | | | |
| ng out the , use ab key | | | | | | | |
| our o not turn | | Municipality | | | # of households | | |
| | 2. | Contact person – the person who should be contacted if DEP has questions about this application. Name | | | | | |
| <u> </u> | | | | | | | |
| | | Title | | | Telephone Number | | |
| | 3. | Site: | | | · | | |
| | | Collection center name (e.g. recycling drop-off center, landfill, transfer station) | | | | | |
| | | Street address | | | | | |
| | | City/town | Zip |) | Hazardous Waste Generator ID Number OR | | |
| | | Date of application for EPA Identification Number, if not yet assigned | | | | | |
| | 4. | Collection center operator – the entity that controls and operates the collection program (e.g. Department of Public Works): | | | | | |
| | | Name (if different from abov | e) | | | | |
| | | Contact person: | | | Telephone Number | | |
| | | Mailing address | | | | | |
| | | City/town | Zip | | E-mail | | |
| | 5. | Responsible person(s)/operator – person designated by the applicant for on-site management of use oil and/or paint, including sorting, record-keeping, manifest signing: | | | | | |
| | | Name and Title (if different f | rom abovo) | | | | |



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention

Application for Collection Center For Used Oil and/or Surplus Paint

| A. Identification | Information (| (cont.) | |
|-------------------|---------------|---------|--|
|-------------------|---------------|---------|--|

| 6. | Hazardous waste transporter – licensed transporter who is contracted to remove the hazardous waste paint and/or oil (if known at this time): | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| | Name of hazardous waste transporter of paint | | | | | | | | |
| | Name of hazardous waste transporter of oil | | | | | | | | |
| 7. | Is the space heater is used for burning waste oil? Yes No If yes, has the space heater been approved by the local fire department? Yes No (See also Best Management Practices for Municipal Oil Collectors with Space Heaters | | | | | | | | |
| 8. | Physical description of the center. Describe in a schematic the location of the following in relation to named roads and significant buildings or features near the site: | | | | | | | | |
| | a. Above-ground tank for used oil b. Paint collection shed c. Containment for related automotive recyclable materials, e.g. spent antifreeze, oil filters, | | | | | | | | |
| | batteries, tires d. The receiving area, sorting area, work area surface e. Hazardous waste accumulation area and estimated capacity in gallons f. Security, in form of fencing, guard house g. Access and egress for users of the center and for emergency response vehicles, and signs directing the public | | | | | | | | |
| | h. Any public or private water supply wells or surface water bodies within 500 feet | | | | | | | | |
| 9. | Has the local fire department approved the site for paint collection and storage? Yes No | | | | | | | | |
| В. | Collection Center Operation Information | | | | | | | | |
| 1. | Service plan for oil collection center: | | | | | | | | |
| | a. Days and times when the used oil collection center is open: | | | | | | | | |
| | Check if also collecting: | | | | | | | | |
| | ☐ oil filters ☐ spent antifreeze ☐ tires ☐ automotive batteries | | | | | | | | |
| 2. | ervice plan for paint collection center: | | | | | | | | |
| | b. Days and times when surplus paint is accepted from residents: | | | | | | | | |
| c. Days and times when surplus paint is accepted from VSQG;s (if applicable): | | | | | | | | | |
| | d. Days and times when surplus paint is offered to residents? | | | | | | | | |



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention

Application for Collection Center For Used Oil and/or Surplus Paint

| В. | Collection Center Operation Information (cont.) | | | | | |
|----|---|--|--|--|--|--|
| | e. Will there be any limits on type of paint material accepted? ☐ Yes ☐ No | | | | | |
| | If yes, indicate what will not be accepted | | | | | |
| | Attach and number additional sheets for the following questions: | | | | | |
| 2. | Education Plan - Describe your plan to educate the service area about the collection program, appropriate handling of the materials, and the availability of paint products for reuse: | | | | | |
| 3. | Financial assurance plan - Describe your budget and funding sources for the attendant, public | | | | | |
| 0. | education, capital equipment costs, shipping of materials for recycling or disposal. Funding may come from private sources or user fees: | | | | | |
| | | | | | | |
| 4. | Operations plan Describe who will be responsible for accepting materials from residents, categorizing materials, keeping records, performing weekly inspections and other regulatory compliance and calling for waste pick-ups: | | | | | |
| | | | | | | |
| 5. | Emergency prevention plan - List equipment and materials the center for emergency response, such as absorbent clean-up materials, portable fire extinguishers, telephone with emergency numbers posted nearby, etc.: | | | | | |
| | | | | | | |
| 6. | Training Verification for operators of paint programs - Describe the training or preparation of the operator or site manager of the collection program: | | | | | |
| | | | | | | |



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention

Application for Collection Center

For Used Oil and/or Surplus Paint

C. Certification

To be completed by an authorized representative of the applicant.

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

I understand that a used oil and/or surplus paint collection must be managed in accordance with all applicable environmental laws and regulations and that DEP may inspect this center to verify compliance."

Print name

Authorized signature

Position/title

Date

Please mail forms to the following DEP staff, according to your DEP region:

Northeast: Dave LaBrode Southeast: Carl Natho

DEP Northeast Region
One Winter Street
Boston, MA 02108

DEP Southeast Region
20 Riverside Drive
Lakeville, MA 02347

Central: John McMichael Western: John Downes

DEP Central Region DEP Western Region

627 Main St. 436 Dwight Street
Worcester, MA 01605 Springfield, MA 01103